UNITED STATES DISTRICT COURT

DISTRICT OF OREGON

adidas America, Inc., et al.	Case No.: 3:24-cv-00740-AN					
Plaintiff(s),						
v.	MOTION FOR LEAVE TO APPEAR PRO HAC VICE					
Aviator Nation, Inc., et al.						
Defendant(s).						
	-					
Attorney Bethany Nelson	requests special admission pro hac					
vice to the Bar of the United States District Cou	rt for the District of Oregon in the above-					
captioned case for the purposes of representing	the following party (or parties):					
adidas America, Inc. and adidas AG						
In support of this application, I certify th	nat: 1) I am an active member in good standing					
with the Georgia State Bar; and 2) that I have read and am familiar with the Federal						
Rules of Evidence, the Federal Rules of Civil ar	nd Criminal Procedure, the Local Rules of this					
Court, and this Court's Statement of Professiona	ılism.					
I understand that my admission to the Ba	ar of the United States District Court for the					
District of Oregon is solely for the purpose of lit	tigating in the above matter and will be					
terminated upon the conclusion of the matter.						
(1) PERSONAL DATA:						

Name:	Nelson	Bethany				
	(Last Nam	e) (First Name)	(MI)	(Suffix)		
Agency/firm affiliation: Kilpatrick Townsend & Stockton LLP						
Mailing address: 1100 Peachtree Street, N.E., STE 2800						
City: At	lanta	State:GA	Zip:	30309		
Phone number: (404) 815-6500		04) 815-6500 Fax number:	(404) 815-6555			
Business e-mail address: brnelson@ktslaw.com						

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(2)	BAR ADMISSION INFORMATION:					
	(a)	State bar admission(s), date(s) of admission, and bar number(s): Georgia Superior Court - 11/16/2017, GA. Bar Number 748279				
		Georgia Supreme Court - 1/23/2019				
	(b)	Other federal court admission(s) and date(s) of admission: Northern District of Georgia - 1/24/2019				
		Federal Circuit - 2/26/2019				
(3)	CERTIFICATION OF DISCIPLINARY ACTIONS:					
7	I am not now, nor have I ever been, subject to any disciplinary action by any state or federal bar association or subject to judicial sanctions.					
	I am now or have been subject to disciplinary action by a state or federal bar association or subject to judicial sanctions. (Attach letter of explanation.)					
(4)	CERTIFICATION OF PROFESSIONAL LIABILITY INSURANCE: Pursuant to LR 83-3, I have professional liability insurance, or financial responsibility equivalent to liability insurance, that meets the insurance requirements of the Oregon State Bar for attorneys practicing in this District, and that will apply and remain in force for the duration of the case, including any appeal proceedings.					
(5)	CM/ECF REGISTRATION: I acknowledge that I will become a registered user of the Court's case management and electronic case filing system (CM/ECF) upon approval of this application, and I consent to electronic service pursuant to Fed. R. Civ. P. 5(b)(2)(E) and the Local Rules of the District of Oregon.					
		ney Seeking <i>Pro Hac Vice</i> Admission: I have read and understand the -3, and I certify that the above information is true and correct.				
DATED): <u>05/02/</u>	2024				
		Bethany R. nelson				
		(Signature)				

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REQUIREMENT TO ASSOCIATE WITH LOCAL COUNSEL:

LR 83-3(a)(1) requires applicants for <i>pro</i> unless requesting a waiver of the requiren			with local co	ounsel,		
To request a waiver of the requirement to following box:	associate with loca	l counsel und	ler LR 45-1,	check the		
I seek admission for the limited pu Court did not issue. Pursuant to L requirement to associate with loca from local counsel with this applic	R 45-1(b), I request l counsel and theref	t a waiver of	the LR 83-3	(a)(1)		
To associate with local counsel, provide the obtain the signature of local counsel.	he following inform	nation about l	local counse	l, and		
Name: Feldman	Stephen	I	M.			
(Last Name)	(First Name)		(MI)	(Suffix)		
OSB number: <u>932674</u>						
Agency/firm affiliation: Perkins Coie LLP						
Mailing address: 1120 NW Couch Street, Tenth Floor						
City: Portland	State: OR	Zip:		97209		
Phone number: (503) 727-2000	Fax number: (5	503) 727-2222	2			
Business e-mail address: sfeldman@perkin	scoie.com			_		
CERTIFICATION OF ASSOCIATE L	OCAL COUNSEI	.:				
I certify that I am a member in good stand understand the requirements of LR 83-3, a number 3:24-cv-00740-AN	_	·				

/s/ Stephen M. Feldman (Signature of Local Counsel)

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